

AF - Administrative Functions

AF-B BENEFITS OF UPDATING CHARTS

OUTCOME: The patient will be able to identify some benefits to the patient and to the clinic/hospital as the result of keeping charts updated.

STANDARDS:

1. Identify benefits to the patient, e.g., insurance deductible without co-payment, increased services at this facility.
2. Identify benefits to the hospital/clinic, e.g., increase of services through third party collections.
3. Refer the patient to benefits coordinator or other resources as appropriate.

AF-CON CONFIDENTIALITY

OUTCOME: The patient/family will understand that the patient's health information will be kept confidential.

STANDARDS:

1. Briefly explain the institution's policies regarding confidentiality and privacy of protected health information under the current regulations.
2. Explain the instances where patient information might be divulged, (third-party billing, continuation of care, transfer to another facility) and what information will be divulged.
3. Explain that a "Release of Information" will be obtained prior to release of medical information except when related to continuation of care, billing, or transfer to another facility.
4. Explain that information will not be provided to others, including family and friends, without written permission from the patient.
5. As indicated, emphasize the importance of respecting the right to confidentiality and privacy of other patients.

AF-FU FOLLOW-UP

OUTCOME: The patient/family will keep the business office updated regarding their demographic data at every visit.

STANDARDS:

1. Discuss the importance of maintaining updated information in order to enable the physician or other provider to contact the patient in case of emergency or lab results that need immediate attention.
 - a. Address
 - b. Telephone number
 - c. Emergency contact
 - d. Third party payers, if any
 - e. Name changes
2. Discuss the procedure for providing updated and current information as soon as it becomes available.
3. Explain that updated information will improve the delivery of care and treatment at the T/I/U Clinic/Hospital.
4. Explain that no discrimination will occur based on availability of third party payment resources.
5. Discuss the importance of follow-up care and the requirement to notify contract health services of any future appointments and procedures in the private sector. Referrals are for one visit only.

AF-REF REFERRAL PROCESS

OUTCOME: The patient/family will understand the referral process and financial responsibilities. (Choose from the following standards as appropriate.)

STANDARDS:

1. Emphasize that referrals to outside providers by Indian Health Service primary providers typically will be processed by Contract Health Services.
2. Explain that the procedure for the referral to the private sector is usually based on a priority system and/or waiting list.
3. Explain that coverage by insurance companies and Medicare/Medicaid packages will be utilized prior to contract health service funds in most cases. The Indian Health Service is a payer of last resort.
4. Discuss the rules/regulations of Contract Health Services.
5. Refer as appropriate to community resources for Medicaid/Medicare enrollment, e.g., benefits coordinator.
6. Explain that future and/or additional referrals must be approved prior to the appointment.
7. Explain the institution's process for appealing Contract Health denials.

8. Discuss the institution's Contract Health process for dealing with after hours emergency room/urgent care visits.

AF-RI PATIENT RIGHTS AND RESPONSIBILITIES

OUTCOME: The patient/family will understand the patient's rights and responsibilities.

STANDARDS:

1. Explain to the patient/family of the patient's rights and responsibilities.
2. Discuss the patient's rights to privacy and confidentiality with exceptions for patient safety and harm to self/harm to others as appropriate.
3. Explain to the patient/family the process for addressing conflict resolution and grievance.